

POSITION	INITIALS	ID NO.	DATE
FEES DETERMINATION	SK	7105	4/1/00
O.I.P.E. CLASSIFIER			1-5-1-1-1
FORMALITY REVIEW	1	691916	5/23/00
RESPONSE FORMALITY REVIEW			

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral)... Canceled A ..... Appeal  
 ÷ ..... Restricted 0 ..... Objected

Claim	Date
Final	
Original	
1	7/18/04
2	✓
3	
4	
5	✓
6	✓
7	✓
8	
9	
10	✓
11	✓
12	✓
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15	✓
16	✓
17	✓
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21	✓
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39	✓
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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